

FILED

NOV 29 2016

CLERK, U.S. DISTRICT COURT
SOUTHERN DISTRICT OF ILLINOIS
EAST ST. LOUIS OFFICE

UNITED STATES DISTRICT COURT

for the

Southern District of Illinois

<u>James A. Webb Sr</u>)	Case Number: <u>16-1284-NJR</u>
_____)	(Clerk's Office will provide)
_____)	
Plaintiff/Petitioner(s))	<input checked="" type="checkbox"/> CIVIL RIGHTS COMPLAINT
v.)	pursuant to 42 U.S.C. §1983 (State Prisoner)
<u>Franklin County Jail</u>)	<input type="checkbox"/> CIVIL RIGHTS COMPLAINT
_____)	pursuant to 28 U.S.C. §1331 (Federal Prisoner)
_____)	<input checked="" type="checkbox"/> CIVIL COMPLAINT
Defendant/Respondent(s))	pursuant to the Federal Tort Claims Act,
)	28 U.S.C. §§1346, 2671-2680, or other law

I. JURISDICTION

Plaintiff:

- A. Plaintiff's mailing address, register number, and present place of confinement.

JACKSON COUNTY Jail
James R. Webb Jr.
1001 Mulberry St.
Murphysboro, Illinois 62966

James Webb Sr.
603 Old Crest Springs Rd.
Morris, IL 62959

Defendant #1:

- B. Defendant
- Franklin County Jail
- is employed as

(a) (Name of First Defendant)

(b) (Position/Title)

with Jesse Young - Officer Prisoner

(c) (Employer's Name and Address)

At the time the claim(s) alleged this complaint arose, was Defendant #1 employed by the state, local, or federal government? ☒ Yes ☐ No

If your answer is YES, briefly explain:

The whole facility of
the Franklin County Jail

Defendant #2:

C. Defendant _____ is employed as

(Name of Second Defendant)

(Position/Title)

with _____

(Employer's Name and Address)

At the time the claim(s) alleged in this complaint arose, was Defendant #2
employed by the state, local, or federal government? ☐ Yes ☐ No

If you answer is YES, briefly explain:

Additional Defendant(s) (if any):

D. Using the outline set forth above, identify any additional Defendant(s).

II. PREVIOUS LAWSUITS

A. Have you begun any other lawsuits in state or federal court relating to your imprisonment? ☐ Yes ☒ No

B. If your answer to "A" is YES, describe each lawsuit in the space below. If there is more than one lawsuit, you must describe the additional lawsuits on another sheet of paper using the same outline. Failure to comply with this provision may result in summary denial of your complaint.

1. Parties to previous lawsuits:
Plaintiff(s):

Defendant(s):

2. Court (if federal court, name of the district; if state court, name of the county):

3. Docket number:

4. Name of Judge to whom case was assigned:

5. Type of case (for example: Was it a habeas corpus or civil rights action?):

6. Disposition of case (for example: Was the case dismissed? Was it appealed? Is it still pending?):

7. Approximate date of filing lawsuit:

8. Approximate date of disposition:

III. GRIEVANCE PROCEDURE

A. Is there a prisoner grievance procedure in the institution? ☒ Yes ☐ No

B. Did you present the facts relating to your complaint in the prisoner grievance procedure? ☐ Yes ☒ No

C. If your answer is YES,
1. What steps did you take?

2. What was the result?

D. If your answer is NO, explain why not. They took me to Decatur's hospital in Evansville Indiana, I was on life support for 8 days there for two weeks.

E. If there is no prisoner grievance procedure in the institution, did you complain to prison authorities? ☐ Yes ☐ No

F. If your answer is YES,
1. What steps did you take?

2. What was the result?

G. If your answer is NO, explain why not.

H. Attach copies of your request for an administrative remedy and any response you received. If you cannot do so, explain why not:

*I wasn't in facility anymore so I can't
The procedure,*

IV. STATEMENT OF CLAIM

- A. State here, as briefly as possible, when, where, how, and by whom you feel your constitutional rights were violated. Do not include legal arguments or citations. If you wish to present legal arguments or citations, file a separate memorandum of law. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. If your claims relate to prison disciplinary proceedings, attach copies of the disciplinary charges and any disciplinary hearing summary as exhibits. You should also attach any relevant, supporting documentation.

On Sunday May the 22nd 2016 at the Franklin County jail I was hanging by my neck. Officer Young and Officer Prosoedgick saw me, slammed the cell door, and left me hanging for approximately 15 minutes. It was all on camera, I have 16 witnesses and this is improper protocol. Now I am physically and mentally impaired.

5 of my witnesses are officers

V. REQUEST FOR RELIEF

State exactly what you want this court to do for you. If you are a state or federal prisoner and seek relief which affects the fact or duration of your imprisonment (for example: illegal detention, restoration of good time, expungement of records, or parole), you must file your claim on a habeas corpus form, pursuant to 28 U.S.C. §§ 2241, 2254, or 2255. Copies of these forms are available from the clerk's office.

I want to be taken off Probation, recieve disability, and recieve a substantial amount of money for pain and suffering.

VI. JURY DEMAND (check one box below)

The plaintiff ☐ does ☒ does not request a trial by jury.

DECLARATION UNDER FEDERAL RULE OF CIVIL PROCEDURE 11

I certify to the best of my knowledge, information, and belief, that this complaint is in full compliance with Rule 11(a) and 11(b) of the Federal Rules of Civil Procedure. The undersigned also recognizes that failure to comply with Rule 11 may result in sanctions.

Signed on: 11-16-2016
(date)

Jackson Co. Jail
1001 Mulberry St.
Street Address

Murphysboro, Illinois 62966
City, State, Zip

[Signature]
Signature of Plaintiff

James R. Webb Jr.
Printed Name

Prisoner Register Number

or
James R. Webb Sr.
03 old Creek Springs Rd.
Nacora, Illinois 62559

Signature of Attorney (if any)